

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	26B-018
	First Inventor or Application Identifier	NAKAGAWA et al.
	Title	CRYSTALLINE BIODEGRADABLE RESIN COMPOSITION
	Express Mail Label No.	

<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>	<b>ADDRESS TO:</b> Commissioner for Patents Mail Stop Patent Application Alexandria, VA 22313-1450
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1. ☒ \* Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2. ☒ Specification [Total Pages **18** ]
  - Descriptive title of the Invention
  - Cross Reference to Related Applications
  - Background of the Invention
  - Summary of the Invention
  - Brief Description of the Drawings
  - Detailed Description of the Preferred Embodiment
  - Claims
  - Abstract of the Disclosure
3. ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets ☐ ]
4. Oath or Declaration [Total Sheets **3** ]
  - a. ☒ Newly executed (original or copy)
  - b. ☐ Copy from a prior application (37 C.F.R. § 1.63 (d))  
(for continuation/divisional with Box 16 completed)
    - i. ☐ **DELETION OF INVENTOR(S)**  
 Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

**\*NOTE FOR ITEMS 1 & 13:** IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28)

5. ☐ Microfiche Computer Program (Appendix)
6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - a. ☐ Computer Readable Copy
  - b. ☐ Paper Copy (identical to computer copy)
  - c. ☐ Statement verifying identity of above copies

ACCOMPANYING APPLICATION PARTS	
7. <input checked="" type="checkbox"/>	Assignment Papers (cover sheet & document(s))
8. <input type="checkbox"/>	37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney
9. <input type="checkbox"/>	English Translation Document (if applicable)
10. <input checked="" type="checkbox"/>	Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations
11. <input type="checkbox"/>	Preliminary Amendment
12. <input checked="" type="checkbox"/>	Return Receipt Postcard (MPEP 503) (should be specifically itemized)
13. <input type="checkbox"/>	*Small Entity Statement(s) (PTO/SB/09-12) <input type="checkbox"/> Statement filed in prior application, Status still proper and desired
14. <input checked="" type="checkbox"/>	Certified Copy of Priority Document(s) (if foreign priority is claimed)
15. <input type="checkbox"/>	Other: .....

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:
- ☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: \_\_\_\_\_
- Prior application information: Examiner \_\_\_\_\_ Group/Art Unit: \_\_\_\_\_
- For CONTINUATION or DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		 (Insert Customer No. or Attach bar code label here)		or <input type="checkbox"/> Correspondence address below	
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Country	Telephone	(703) 707-9110	Fax	(703) 707-9112	

Name (Print/type)	KERRY S. CULPEPPER	Registration No. (Attorney/Agent)	45,672
Signature	<i>Kerry S. Culpepper</i>	Date	June 27, 2003

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16591 U.S. PTO  
 10/606864  
 06/27/03

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="margin: 5px 0;"><i>Patent fees are subject to annual revision.</i></p>		<b>Complete if Known</b>	
		Application Number	
		Filing Date	<b>Jun 27, 2003</b>
		First Named Inventor	<b>NAKAGAWA et al.</b>
		Examiner Name	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Group/Art Unit	
TOTAL AMOUNT OF PAYMENT		(\$)	<b>790</b>
		Attorney Docket No.	<b>26B-018</b>

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																																		
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: <b>50-1147</b></p> <p>Deposit Account Name: <b>POSZ &amp; BETHARDS, PLC</b></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>	<p><b>3. ADDITIONAL FEES</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge – late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge – late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	<b>Kerry S. Culpepper</b>	Registration No. (Attorney/Agent)	<b>45,672</b>
Signature		Telephone	<b>(703) 707-9110</b>
		Date	<b>June 27, 2003</b>

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